

## Transitional care programs to prevent hospital readmissions: Brief phone follow-up only

Literature review updated December 2014.

As part of WSIPP's research approach to identifying evidence-based programs and policies, WSIPP determines "what works" (and what does not work) to improve outcomes using an approach called meta-analysis. For detail on our methods, see our [technical documentation](#). At this time, WSIPP has not yet calculated benefits and costs for this topic.

Program Description: Transitional care programs focus on preventing future hospital readmissions after discharge. Programs in this specific category include those providing post-discharge patient follow-up only, with no pre-discharge assistance.

### Meta-Analysis of Program Effects

Outcomes measured	Primary or secondary participant	No. of effect sizes	Treatment N	Unadjusted effect size (random effects model)		Adjusted effect sizes and standard errors used in the benefit-cost analysis					
						First time ES is estimated			Second time ES is estimated		
				ES	p-value	ES	SE	Age	ES	SE	Age
Hospital readmissions	Primary	5	750	-0.143	0.107	-0.140	0.222	57	0.000	0.000	58

### Citations Used in the Meta-Analysis

- Bostrom, J., Caldwell, J., McGuire, K., & Everson, D. (1996). Telephone follow-up after discharge from the hospital: does it make a difference? *Applied Nursing Research: ANR*, 9(2), 47-52.
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- Riegel, B., Carlson, B., Glaser, D., Kopp, Z., & Romero, T.E. (2002). Standardized telephonic case management in a Hispanic heart failure population. *Disease Management and Health Outcomes*, 10(4), 241-249.
- Riegel, B., Carlson, B., Glaser, D., & Romero, T. (2006). Randomized Controlled Trial of Telephone Case Management in Hispanics of Mexican Origin With Heart Failure. *Journal of Cardiac Failure*, 12(3), 211-219.

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